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# Weekly Bulletin



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EDITOR

## Now is Time to War on Poliomyelitis.

Forty-three cases of poliomyelitis have been reported during the first two weeks of July. During the corresponding two weeks of last year five cases of this disease were reported. There have been 218 cases of the disease reported in California since the first of January. Last year, during the corresponding period, there were but 35 cases reported.

It has been observed that in those years when poliomyelitis becomes unusually prevalent in the late spring and early summer, there is nearly always an extensive and disastrous outbreak of the disease in the late summer and early fall, when, under normal conditions, the disease is seasonally more prevalent. The prompt institution of control measures at the present time, therefore, is of the utmost importance in order that the chances for a widespread epidemic during the coming fall may be minimized.

Poliomyelitis, perhaps, is one of the most common of the communicable diseases. Since paralysis occurs, however, in but a small percentage of cases, proper diagnosis is very often not made. Whenever the disease becomes epidemic, all cases of sudden, acute illness in children must be regarded with suspicion. It should be remembered that poliomyelitis is not essentially a disease of the central nervous system. It is only in a relatively small number of cases that there is any invasion of the central nervous system. Paralysis is purely an accidental and incidental occurrence, and in reality it occurs rarely. Seventy or eighty per

cent of all cases of this disease present merely the aspect of an acute generalized affection without sign of injury to the central nervous system. Environment and social conditions have little bearing upon the appearance of the disease, and it occurs as commonly in sparsely settled rural districts as in crowded cities. It is caused by a filterable virus which is unknown apart from infected human beings. This virus possesses a high degree of resistance, both to cold and to ordinary degrees of heat, for long periods of time. If enclosed in albuminous matter it withstands drying quite readily. Since it can withstand both moist and dry conditions, it can easily be carried into the respiratory tract as a spray produced by coughing, sneezing, etc. It is doubtful if agents, other than man, play any conspicuous part in the transmission of the disease. Poliomyelitis is a human borne, contagious infection, with its portal of entry in the upper respiratory tract, especially in the naso-pharyngeal mucous membrane.

For the sake of safety, cases of severe intestinal disturbances or of common colds, occurring especially in young children, at the present time should be regarded with suspicion. They should, accordingly, be isolated without delay and isolation should be maintained at least until the nature of the illness is definitely determined. The age of the patient should not be considered in making diagnosis. While most cases occur in children around two years of age, many adolescents and young adults are attacked. The younger children seem to weather the acute stages better than adolescents



and young adults, among whom the death rate is especially high. Since the adult carrier is known to play an important part in the transmission of the disease, it is important that whenever a case of poliomyelitis occurs in a family, all members, as well as other contacts, be isolated for two weeks, as required under the regulations of the California State Board of Health. Cases of poliomyelitis must be quarantined for three weeks.



### **Public Health is Basic Municipal Work.**

"Public health is basic municipal work and should be accorded a more important place among municipal activities," said William P. Capes, Secretary of the New York State Conference of Mayors and Other Municipal Officials, in a talk broadcast from Station WGY recently.

"Unless a municipality is healthful," said Mr. Capes, "it is no fit place in which to live, to work and to play. Before we can have the city beautiful, the city contented, the city efficient, we must have the city healthful. That is why the New York State Conference of Mayors and Other Municipal Officials has always been keenly interested in health work; that is why this organization of sixty cities and thirty first class villages has for the last fifteen years been promoting efficient health regulations and organization and keeping local health officials informed about public health activities and proper public business management.

"The first gathering of city officials, which resulted in the organization of the Mayors' Conference, was called in 1910 for the sole purpose of considering public health questions. This epoch-making event was the beginning of the movement which later resulted in a reorganization of the State Health Department, and following it ninety-two per cent of the annual messages of the mayors dealt principally with local health problems.

"A few years later the Conference urged the scoring of city health work. A member of the State Department of Health, trained in both public health and municipal work, went annually from city to city, and, by a scientific method of scoring, learned the efficiency and value of each local health activity. This not only showed each city administration where its public health work was effective or weak, but also created a rivalry among the municipalities and succeeding local health administrations which produced better health protection.

"The need for a uniform budget and accounting system for health bodies next showed itself. In 1919 such a budget and system were prepared for the cities jointly by the State Department of Health and the Conference. The adoption of these by the cities has resulted in providing comparable data about health appropriations and expenditures and a correct conception of what are proper health activities. Before this work was done, many municipalities included among their health activities the catching and impounding of stray dogs, garbage and ash collection, and the maintenance and operation of sewers and sewage disposal plants. Forty-two per cent of the health appropriation of one city was used for the care of homeless dogs. Practically all city health budgets now exclude these pseudo health activities.

"The next important health problem to attract state-wide concern was that of protecting milk sold at retail in cities and villages. The State Department of Health in 1923 accepted the invitation of the cities, acting through the Mayors' Conference, to create a committee of experts to prepare protective measures. We now have a model milk ordinance for the guidance of every city and village in the state. Thirty-seven cities and villages have adopted this model or a code requiring equal or higher standards.

"The tremendous increase in building activities and building costs within the last few years brought forth the need for municipal plumbing codes or a revision of existing ones. The Conference, in 1924, again sought the valued cooperation of the State Department of Health. A committee representing the two organizations and the State Master Plumbers' Association, with the assistance of eminent experts, has recently prepared a standard plumbing code for adoption by the cities and villages.

"Through its clearing house of information located at Albany, the Mayors' Conference has made it impossible for any local health official to excuse a waste of public funds on theories and experiments which have failed in other communities. The New York State Bureau of Municipal Information, established in 1915, makes available to all local health officials the best health thoughts and efforts of every American city so that failures may be avoided and successes repeated. This activity of the Mayors' Conference is substituting facts for guesses in municipal work. A health officer had heard about the use by cities of iodine in the treatment of simple



goiter. He wanted to know what cities were doing it, how they were doing it and the result. An inquiry directed to the Bureau brought him the information. A village board was in doubt about the charges presented to it for the care of a smallpox patient. A letter to the Bureau resulted in the receipt of a report showing what other municipalities had paid for similar service. These are illustrations of the hundreds of inquiries received annually by the Bureau from health and other municipal officials.

"The work of the Mayors' Conference leaves no doubt about its attitude on public health. It is basic municipal work."



### Good Records Made by Berkeley and Long Beach.

The baby death rate in the cities of the United States for last year reached the lowest point ever attained. According to the infant mortality report published annually by the American Child Health Association, New York City, the combined rate for 629 cities in the birth registration area was 72.2 as compared with a rate of 78 for 1923. These figures indicate that 72 babies out of every one thousand born during 1924 died within their first year.

The birth registration area of the country consists of 33 states and the District of Columbia. There are 638 cities of ten thousand or more population according to the 1920 census within the area. The report includes returns from 98.6 per cent of these cities. The birth registration area was increased by the addition of three states in 1924, namely, Florida, Iowa and North Dakota.

The lowest rate of all the cities in this area is credited to New Philadelphia, Ohio, a city of about eleven thousand population. The rate was 25.

The report discusses the cities by size: Of the largest cities, those of 250,000 population or more, Seattle, Washington, is low with a rate of 45; Minneapolis, Minnesota, and Portland, Oregon, stand second and third each with rates of 54.

In the group with populations from 100,000 to 250,000, Cambridge, Massachusetts, has the best record with a rate of 42; Spokane, Washington, is second with 52; and Grand Rapids, Michigan, third with 53.

Long Beach, California, stands first among the cities of 50,000 to 100,000. Its rate is 41. Berkeley, California, is second with 51 and Brockton, Massachusetts, third with 53.

Oak Park, Illinois, with a rate of 29, Brookline, Massachusetts, and Revere, Massachusetts, each with a rate of 30, are the leaders in cities of from 25,000 to 50,000 population.

In the smallest cities, from 10,000 to 25,000 population, New Philadelphia, Ohio, has a rate of 25; Cuyahoga Falls, Ohio, 29, and Dedham, Massachusetts, 29.

Of the ten largest cities in the birth registration area, Los Angeles is low with a rate of 66.0, a mere shade in advance of Cleveland with 66.1. New York City stands third with a rate of 68. The other cities in order are Boston 74.7; Philadelphia 75.2; Chicago 77; Detroit 79; Buffalo 84; Baltimore 85; and Pittsburgh 92.

The urban rates for the states show Oregon leading with a rate of 51.4; Washington 51.6; Minnesota 55.7; Utah 58.6; California 62.4 and Massachusetts 64.8.

Of thirty states whose urban records have been available the last two years 26 show reductions in infant mortality in 1924 as compared with the previous year.



### Announce Changes in Health Officers.

Dr. R. C. Main, Health Officer of Monterey County, has taken over the public health administration of the cities of Pacific Grove and Monterey, both of which municipalities are now included in the county health unit. Mr. M. B. Ordway was formerly Health Officer of Pacific Grove and Mr. H. R. Alexander was Health Officer of Monterey. Communications should be addressed to Dr. Main at Salinas or to Mr. Clyde L. Dorsey, Deputy Health Officer, Monterey.

Dr. Smith McMullin of Yuba City has been appointed Health Officer of Sutter County, succeeding Dr. W. L. Stephens of Meridian.

Dr. F. W. Townsend of Loyalton has been appointed Health Officer of Sierra County, filling an office which has been vacant for several months, following the departure of Dr. A. O. Eckhardt to the Pribilof Islands.

Mr. Edgar A. Miller has been appointed Health Officer of the newly incorporated city of Tujunga in Los Angeles County.

F. A. Beggs has been appointed Health Officer of Signal Hill, succeeding Dr. Arthur E. Pike.

Dr. H. S. Gordon has been appointed Health Officer of Perris, succeeding Dr. D. W. Sheldon.



**MORBIDITY.\*****Diphtheria.**

58 cases of diphtheria have been reported, as follows: Los Angeles 10, Oakland 9, Los Angeles County 7, San Francisco 8, Long Beach 1, Sacramento 3, Oxnard 1, Gilroy 1, Stockton 1, Pomona 1, Pasadena 1, Berkeley 1, Stanislaus County 1, Merced County 2, Santa Cruz County 1, Alameda 3, Sonoma County 1, Burbank 1, Santa Clara County 2, Bakersfield 1, Pleasanton 1, Yuba County 1.

**Measles.**

28 cases of measles have been reported, as follows: Los Angeles 9, Corona 5, Los Angeles County 4, San Diego 1, Huntington Park 1, Colton 1, Long Beach 2, Pasadena 1, San Francisco 3, Watts 1.

**Scarlet Fever.**

50 cases of scarlet fever have been reported, as follows: Los Angeles 10, Long Beach 8, Los Angeles County 6, Kern County 5, Corona 1, San Diego 3, Stockton 3, San Rafael 1, Bakersfield 2, Fresno County 1, Fresno 1, Vacaville 1, San Francisco 3, Santa Clara County 1, Santa Barbara 4.

**Smallpox.**

63 cases of smallpox have been reported, as follows: Los Angeles 22, Oakland 9, San Diego 8, Berkeley 6, Humboldt County 1, Fullerton 1, Napa County 1, Sonoma County 1, Petaluma 1, Nevada County 1, Los Angeles County 2, Santa Cruz County 1, Mt. Shasta 1, San Jose 1, Santa Clara County 2, Pacific Grove 3, San Francisco 2.

**Typhoid Fever.**

15 cases of typhoid fever have been reported, as follows: Sonoma County 1, Fresno 1, San

Joaquin County 1, Contra Costa County 1, Los Angeles 2, Los Angeles County 1, Sacramento County 2, Yolo County 1, Pittsburg 2, San Mateo 1, Callexico 1, California 1.

**Whooping Cough.**

195 cases of whooping cough have been reported, as follows: Los Angeles 55, San Diego 25, Pacific Grove 16, Pasadena 15, Sacramento 12, Los Angeles County 10, Tracy 5, Berkeley 6, Long Beach 7, Palo Alto 5, Lake County 5, San Francisco 9, Corona 4, Sierra Madre 2, Hayward 1, Santa Clara County 1, San Joaquin County 4, Stockton 1, La Mesa 1, Napa 2, Alameda 3, Fresno 2, Riverside 1, Orange County 1, Fresno County 1, Santa Barbara 1.

**Epidemic Meningitis.**

3 cases of epidemic meningitis have been reported, as follows: Los Angeles 1, Napa County 1, Sacramento 1.

**Leprosy.**

Stockton reported one case of leprosy.

**Epidemic Encephalitis.**

7 cases of epidemic encephalitis have been reported, as follows: Los Angeles 4, San Francisco 1, Pasadena 1, San Diego 1.

**Poliomyelitis.**

21 cases of poliomyelitis have been reported, as follows: Los Angeles 7, Long Beach 1, Bakersfield 1, South Pasadena 1, Los Angeles County 3, San Francisco 2, Pomona 1, Glendora 1, Berkeley 2, Oakland 2.

\*From reports received on July 13th and 14th for week ending July 11th.

**COMMUNICABLE DISEASE REPORTS.**

Disease	1925				1924			
	Week ending			Reports for week ending July 11 received by July 14	Week ending			Reports for week ending July 12 received by July 15
	June 20	June 27	July 4		June 21	June 28	July 5	
Anthrax.....	0	0	0	0	0	0	0	0
Chickenpox.....	142	105	71	70	180	197	109	71
Diphtheria.....	85	61	83	58	256	249	161	149
Dysentery (Bacillary).....	1	1	2	2	1	15	33	1
Epidemic Encephalitis.....	2	1	6	7	2	6	5	1
Epidemic Meningitis.....	2	1	1	3	1	3	1	2
Gonorrhoea.....	88	65	95	73	82	84	46	95
Influenza.....	12	13	12	4	7	1	3	3
Leprosy.....	0	0	1	1	1	2	0	1
Malaria.....	1	2	5	2	4	3	5	1
Measles.....	57	53	34	28	356	255	132	120
Mumps.....	202	120	80	86	53	49	40	24
Pneumonia.....	32	28	36	27	37	87	27	12
Poliomyelitis.....	17	21	22	21	0	1	4	1
Scarlet Fever.....	86	63	66	50	134	118	78	54
Smallpox.....	86	104	63	63	133	133	99	88
Syphilis.....	121	181	179	60	81	119	82	149
Tuberculosis.....	228	181	222	226	202	220	158	139
Typhoid Fever.....	15	13	22	15	32	30	29	20
Whooping Cough.....	286	197	168	195	45	68	37	65
Totals.....	1463	1121	1161	991	1607	1640	1049	996

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